Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	James First name Timothy	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Bullard Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	}	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6997	

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Debtor 1 James Timothy Bullard

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	511 N. Jones Street	If Debtor 2 lives at a different address:			
		Pembroke, NC 28372 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Robeson				
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known)

Deb	tor 1 James Timothy Bu	ullard	Case number (if known)						
	·								
Part	Tell the Court About	Your Bankruptcy C	ase						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7							
		☐ Chapter 11							
		☐ Chapter 12							
		■ Chapter 13							
		— Chapter 13							
8.	How you will pay the fee	about how y	ou may pay. Typically r attorney is submittin	y, if you are paying the fee yo	with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, out attorney may pay with a credit card or ch	or money			
					n, sign and attach the Application for Individuals	to Pay			
		ŭ	ee in Installments (Of at my fee be waived	,	only if you are filing for Chapter 7. By law, a jude	ige may			
		but is not red	quired to, waive your	fee, and may do so only if you	ar income is less than 150% of the official poverty installments). If you choose this option, you mus	y line that			
		the Applicati	on to Have the Chap	nter 7 Filing Fee Waived (Offic	ial Form 103B) and file it with your petition.				
9.	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
		District		When	Case number				
		District		When	Case number				
		District		When	Case number				
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
		Debtor			Relationship to you				
		District		When	Case number, if known				
		Debtor			Relationship to you				
		District		When	Case number, if known				
11.	Do you rent your	■ No. Go to	line 12.						
	residence?	☐ Yes. Has ye	our landlord obtained	d an eviction judgment agains	you and do you want to stay in your residence?				
			No. Go to line 12.						
			Yes. Fill out <i>Initial</i> S bankruptcy petition		ludgment Against You (Form 101A) and file it witl	h this			

Debtor 1

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Case number (if known)

12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Stat	e & ZIP Code		
	it to this petition.		Chec	k the appropriate bo	x to describe your business:		
				Health Care Busir	less (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> <i>debtor?</i>	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can see deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am ı	not filing under Chap	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrupto Code.				
		☐ Yes.	I am i	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code		
Par	Poport if You Own or	Hava An	, Hozord	ous Branariy ar An	y Property That Needs Immediate Attention		
	Do you own or have any	■ No.	пагагис	ous Property of An	y Property That Needs immediate Attention		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed.			s the property?			
	or a building that needs urgent repairs?						

Debtor 1 James Timothy Bullard

Debtor 1 James Timothy Bullard

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Dec	otor 1 James Timothy B	ullard		Case num	nber (if known)			
Par	t 6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
				Dusiness debts? Business debts are debte restment or through the operation of the b				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or busing	ness debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. are paid that funds will be a	Do you estimate that after any exempt povailable to distribute to unsecured creditors	roperty is excluded and administrative expenses ors?			
	administrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes					
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		5001-10,000	5 0,001-100,000			
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to be worth?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	□ \$100,0	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have exa	ımined this petition, and I de	eclare under penalty of perjury that the inf	ormation provided is true and correct.			
				7, I am aware that I may proceed, if eligible relief available under each chapter, and	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.			
If no attorney represents me and I did not pay or agree to pa document, I have obtained and read the notice required by 1								
				chapter of title 11, United States Code, s				
I understand making a false statement, concealing property, or obtaining money or property by fraud in connectio bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152 and 3571.								
			s Timothy Bullard imothy Bullard	Signature of Del	htor 2			
			of Debtor 1	Signature of De	501 2			
		Executed	on August 5, 2016	Executed on				
			MM / DD / YYYY		MM / DD / YYYY			

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Debtor 1 James Timothy Bullard Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Bruce Allen	Date	August 5, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Bruce Allen		
Printed name		
Bruce Allen, Attorney at Law		
Firm name		
1000 Wildwood Drive		
Fayetteville, NC 28304-3036		
Number, Street, City, State & ZIP Code		
Contact phone (910)867-7770	Email address	wlfman@prodigy.net
13858		
Bar number & State		

	0000 10	0 04117 0 0140	D001 1 1100 0		0.00	i age	0 01 00
Fill	in this informa	ation to identify your	case:		ı		
Deb	otor 1	James Timothy E	Bullard Middle Name	Last Name			
	otor 2						
(Spo	ouse if, filing)	First Name	Middle Name	Last Name			
Uni	ted States Ban	kruptcy Court for the:	EASTERN DISTRICT (OF NORTH CAROLINA			
	se number					Charle:	f dhin in nu
(II KII	iowii)					amende	f this is an ed filing
∩f	ficial For	m 106Sum					
			and Liabilities a	nd Certain Statistical Informat	ion	12	2/15
Be a info you	as complete ar rmation. Fill or r original form	nd accurate as possibut all of your schedul s, you must fill out a	ole. If two married people es first; then complete the	e are filing together, both are equally respon he information on this form. If you are filing k the box at the top of this page.	sible fo		
Par	t 1: Summa	rize Your Assets					
						Your ass Value of	sets what you own
1.		B: Property (Official Foundation 55, Total real estate, f				\$	28,200.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B.			\$	4,017.98
	1c. Copy line	63, Total of all propert	y on Schedule A/B			\$	32,217.98
Par	t 2: Summa	rize Your Liabilities					
						Your lial	oilities
						Amount	you owe
2.			laims Secured by Property mn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedu</i>	le D	\$	62,865.00
3.			Unsecured Claims (Official 1) (priority unsecured clain	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>		\$	467.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F		\$	6,234.75
				Your total lial	bilities	\$	69,566.75
Par	t 3: Summa	rize Your Income and	Expenses		-		
4.		our Income (Official Fo		e /		\$	3,148.51
5.	Schedule J: \Copy your mo	Your Expenses (Official onthly expenses from li	Form 106J) ne 22c of Schedule J			\$	2,034.00
Par	t 4: Answer	These Questions for	Administrative and Stat	tistical Records			
6.	-		er Chapters 7, 11, or 13? on this part of the form. C	Pheck this box and submit this form to the court	with you	r other sche	edules.
7.	YesWhat kind of	debt do you have?					
				debts are those "incurred by an individual prima 9g for statistical purposes. 28 U.S.C. § 159.	arily for a	ı personal, f	amily, or
		bts are not primarily t with your other sched		eve nothing to report on this part of the form. Ch	eck this	box and sub	omit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 James Timothy Bullard

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,148.51

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Dort A on Cohodula E/E compaths following:	Total cla	nim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	467.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	467.00

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	J 430 1 0	7 0 4 1 1 7 0 0	110 2001	- 110	.u 00/00/10 E	intered ooroor		i ag	3 10 01 00
Fill in t	his inform	ation to identify	your case and th	nis filin	g:				
Debtor	1	James Timo	thy Bullard						
Dobtor	2	First Name	Middle	e Name	Last Na	ame			
Debtor (Spouse,		First Name	Middle	e Name	Last Na	ame			
United	States Ban	kruptcy Court for	the: EASTERN	DISTR	ICT OF NORTH CAR	OLINA			
Case n	umber							П	Check if this is an
									amended filing
Offic	ial For	m 106A/E	3						
		A/B: Pi	_						12/15
				an asse	t only once. If an asset	fits in more than one	category list the a	sset in the	
think it fi informati	its best. Be	as complete and a space is needed,	accurate as possibl	e. If two	married people are fili his form. On the top of	ng together, both are	equally responsible	e for supply	ring correct
Part 1:	Describe E	ach Residence, B	uilding, Land, or Ot	her Rea	l Estate You Own or Ha	ve an Interest In			
1. Do vo	ou own or ha	ave any legal or eg	uitable interest in a	nv resid	lence, building, land, o	r similar property?			
`		, , ,		,	3, 11 1, 1				
_	. Go to Part 2								
■ Yes	s. Where is	the property?							
1.1				Wha	t is the property? Check	all that apply			
	11 N. Jone	es Street			Single-family home	ан тас арру	Do not deduct sec	ured claims	or exemptions. Put
Str	eet address, if	available, or other des	cription	_	Duplex or multi-unit bu	uilding	the amount of any	secured cla	ims on <i>Schedule D:</i>
					Condominium or coop	erative	Creditors Who Ha	ve Claims S	ecured by Property.
				_	Manufactured or mobi	lo homo			
Pé	embroke	NC	28372-0000	_		ie nome	Current value of entire property?		urrent value of the ortion you own?
City		State	ZIP Code		Investment property		\$56,40	-	\$28,200.00
•	•				Timeshare				ownership interest
					Other		(such as fee sim	ole, tenancy	by the entireties, or
				Who	has an interest in the	property? Check one	a life estate), if ke		divided 1/2
					Debtor 1 only		interest	illion an	aividod 1/2
Ro	obeson				Debtor 2 only		_		
Co	ounty				Debtor 1 and Debtor 2	only?	— Chack if this	is commun	nity property
					At least one of the deb	otors and another	(see instruction		nty property
					r information you wish		n, such as local		
				prop	erty identification num	ber.			
									1
					your entries from Pa				\$28,200.00
pag	ges you ha	ve attached for	Part 1. Write that	numbe	er here		=>		φ20,200.00
Part 2:	Describe Y	our Vehicles							
					i ny vehicles, whethe Schedule G: Executor			any vehicl	es you own that
3. Cars	, vans, tru	cks, tractors, sp	ort utility vehicle	s, mote	orcycles				
■ No									
☐ Ye									

Official Form 106A/B Schedule A/B: Property page 1

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

■ No

Official Form 106A/B Schedule A/B: Property page 2

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De	btor 1 James Timo	thy Bul	lard				Case number (if known)	
ı	☐ Yes. Describe							
1	Non-farm animals Examples: Dogs, cats, No Yes. Describe	birds, ho	rses					
ı	Any other personal an No Yes. Give specific inf		•	did not alrea	ıdy list, inclu	uding any health a	aids you did not list	
15.	Add the dollar value for Part 3. Write that						you have attached	\$3,900.00
Par	t 4: Describe Your Finan	cial Asse	ts					
	you own or have any l			st in any of th	ne following) ?		Current value of the portion you own? Do not deduct secured claims or exemptions.
 	■ No □ Yes Deposits of money						when you file your petitic	
ı			r other financial ve multiple acco	unts with the	same institut	tion, list each.	edit unions, brokerage h	nouses, and other similar
	Yes			Ins	stitution nam	ne:		
		17.1.	Checking	<u>Pi</u>	NC Bank			\$1.00
		17.2.	Debit Accou	ınt B	В&Т			\$116.98
18.	Bonds, mutual funds, Examples: Bond funds,				irms, money	market accounts		
ĺ	■ N0 □ Yes		Institution or iss	uer name:				
_	joint venture	ock and	interests in inc	orporated an	nd unincorp	orated businesse	s, including an interes	t in an LLC, partnership, and
	■ No	ormation	about them					
	☐ Yes. Give specific inf		about them me of entity:				% of ownership:	
	Government and corpo Negotiable instruments Non-negotiable instrum	include ¡	personal checks,	, cashiers' che	ecks, promis	sory notes, and mo	oney orders.	
	☐ Yes. Give specific info		about them uer name:					

21. **Retirement or pension accounts** *Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ Yes. List each account separately.

Type of account: Institution name:

32. Any interest in property that is due you from someone who has died

Company name:

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

Beneficiary:

■ No

☐ Yes. Give specific information..

Surrender or refund

Deb	otor 1	James Timothy Bullard		Case number (if known)	
		against third parties, whether or not you have filed a law bles: Accidents, employment disputes, insurance claims, or rig		and for payment	
_	_	Describe each claim			
	No	contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to se	t off claims
	☐ Yes.	Describe each claim			
	_ `	nancial assets you did not already list			
_	■ No □ Yes.	Give specific information			
	Add t	he dollar value of all of your entries from Part 4, including art 4. Write that number here			\$117.98
Part	5: De:	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. [Do you d	own or have any legal or equitable interest in any business-relate	d property?		
	No. Go	to Part 6.			
	Yes. G	Go to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46.		own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	_	Go to Part 7.			
	☐ Yes	. Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53.		I have other property of any kind you did not already list?	,		
	No				
	☐ Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	I: Total real estate, line 2			\$28,200.00
56.	Part 2	2: Total vehicles, line 5	\$0.00		
57.	Part 3	3: Total personal and household items, line 15	\$3,900.00		
58.	Part 4	4: Total financial assets, line 36	\$117.98		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$4,017.98	Copy personal property total	\$4,017.98
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$32,217.98

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1	James Timothy B	ullard		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	EASTERN DISTRICT O	F NORTH CAROLINA	
Case number (if known)				☐ Check if this is ar amended filing

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
511 N. Jones Street Pembroke, NC 28372 Robeson County	\$28,200.00		\$0.00	N.C. Gen. Stat. § 1C-1601(a)(1)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	10 100 ((a)(1)
Living Room Furniture, Dining Room Furniture, Bed Room Furniture,	\$900.00		\$900.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Washer, Dryer, Refrigerator, Pots, Pans, and Utensils Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
DVD, and TVs	\$800.00		\$800.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line IIoni Schedule A/B. 7.1			100% of fair market value, up to any applicable statutory limit	
4 Shot Guns, 2 Rifles, and Pistol Line from Schedule A/B: 10.1	\$2,000.00		\$2,000.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line IIIIII Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
Necessary Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line nom Scriedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	

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		iption of the property and line on A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
		g: PNC Bank Schedule A/B: 17.1	\$1.00		\$1.00	N.C. Gen. Stat. § 1-362
	Line nom	00/1000/10/7/2: 1111			100% of fair market value, up to any applicable statutory limit	
		count: BB&T Schedule A/B: 17.2	\$116.98		\$116.98	N.C. Gen. Stat. § 1-362
	Line nom	Scredule A/B. 11.2			100% of fair market value, up to any applicable statutory limit	
3.		laiming a homestead exemption adjustment on 4/01/19 and every			ed on or after the date of adjustme	nt.)
	☐ Yes.	Did you acquire the property covere	ed by the exemption wi	thin 1	215 days before you filed this case	?
		No				
		Yes				

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Rev. 3/2016

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA

IN THE MATTER OF: James Timothy Bullard Debtor(s). CASE NUMBER:

SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

- I, <u>James Timothy Bullard</u>, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).
- 1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market <u>Value</u>	Mortgage Holder or Lien Holder	Amount of Mortgage <u>or Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
511 N. Jones Street Pembroke, NC 28372 Robeson County	56,400.00	Selene Finance Lp	62,865.00	0.00 50% owned	0.00
Debtor's Age:					

Debiors Age:	
Name of former co-owner:	

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
-NONE-						

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 0.00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 1.

Description of Property	Market <u>Value</u>	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
4 Shot Guns, 2 Rifles, and Pistol	2,000.00			2,000.00	2,000.00
DVD, and TVs	800.00			800.00	800.00
Living Room Furniture, Dining Room Furniture, Bed Room Furniture, Washer, Dryer, Refrigerator, Pots, Pans, and					
Utensils	900.00			900.00	900.00
Necessary Clothing	200.00			200.00	200.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 3,900.00

0.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	
-NONE-					

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)	Cash Value
-NONE-	

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description	
-NONE-	

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity

-NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
-NONE-						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 0.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

-NONE-

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary

-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number

-NONE-

0.00

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds	
-NONE-	

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount	Net
Property and Address	<u>Value</u>	<u>Holder</u>	<u>of Lien</u>	<u>Value</u>
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

_		
	-NONE-	

15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA

	Debtor earnings necessary to support family (all earnings from last 60 days), N.C. Gen. Stat.	
a.	§ 1-362	1.00
	Debtor earnings necessary to support family (all earnings from last 60 days), N.C. Gen. Stat.	
b.	§ 1-362	116.98

16. FEDERAL PENSION FUND EXEMPTIONS

-NONE-	
-NONE-	

17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

-NONE-	
110112	

- 18. RECENT PURCHASES
- (a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market <u>Value</u>	Amount <u>of Lien</u>	Net <u>Value</u>
-NONE-			

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt		

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

	Nature of	Amount of	Description of	Value	Net
Claimant	<u>Claim</u>	<u>Claim</u>	Property	of Property	<u>Value</u>
-NONE-					

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

I, <u>James Timothy Bullard</u>, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 4 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Executed on:	August 5, 2016	/s/ James Timothy Bullard
		James Timothy Bullard
		Debtor

Fill in this informat	ion to identify you	Ir case:		=	
Debtor 1	James Timothy First Name	Bullard Middle Name Last Name			
Debtor 2	. not raine	imade rano			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankr	uptcy Court for the	: EASTERN DISTRICT OF NORTH CAROLI	NA		
Casa numbar					
Case number				☐ Check	if this is an
				amen	ded filing
Official Forms	1000				
Official Form					
Schedule D	: Creditors	Who Have Claims Secure	ed by Property	У	12/15
is needed, copy the Ad		If two married people are filing together, both are eout, number the entries, and attach it to this form.			
number (if known).					
1. Do any creditors ha		• • • •	Vou boug pathing also to	a ranget on this form	
<u> </u>		his form to the court with your other schedules.	rou have nothing eise to	o report on this form.	
	of the information	below.			
	ecured Claims		. Column A	Column B	Column C
		more than one secured claim, list the creditor separate s a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
		ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Selene Fina	nce Lp	Describe the property that secures the claim:	\$62,865.00	\$56,400.00	\$6,465.00
Creditor's Name		511 N. Jones Street Pembroke, NC 28372 Robeson County			
0000 Diahm	an d	As of the date you file, the claim is: Check all that			
9990 Richmo Houston, TX		apply. ☐ Contingent			
	y, State & Zip Code	■ Unliquidated			
radinber, Greet, Or	y, diate a zip dode	☐ Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)			
Debtor 1 and Debto	•	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
At least one of the					
community debt	i relates to a	Other (including a right to offset) Mortgage			
	Opened				
	07/07 Last				
	Active	2000			
Date debt was incurre	ed 6/06/14	Last 4 digits of account number 3909			
Add the dollar value	e of your entries in C	Column A on this page. Write that number here:	\$62,86	5 00	
If this is the last page	ge of your form, add	the dollar value totals from all pages.	\$62,86		
Write that number h	iere:		Ψ02,00	3.00	
Part 2: List Other	s to Be Notified fo	or a Debt That You Already Listed			
		e notified about your bankruptcy for a debt that yo			
		owe to someone else, list the creditor in Part 1, and t you listed in Part 1, list the additional creditors he			
debts in Part 1, do no			-	,	
Name Number	, Street, City, State &	Zin Code	siah ling in Dort 4 did	otor the aredit == 0 3 4	
Hutchens L		— On wi	nich line in Part 1 did you er	iter the creditor?	
PO Bo 1028		Last 4	digits of account number _	SP47	
Fayetteville, NC 28302					

Official Form 106D

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Debtor	James Timothy Bullard			Case number (if know)
	First Name	Middle Name	Last Name	
R 5	ame, Number, Street Cobeson County 00 North Elm S umberton, NC	t		On which line in Part 1 did you enter the creditor?

Fill	l in this information	to identify your o	case.						
								1	
De		mes Timothy B	ullara Middle	Name	Last Name	Э			
1	btor 2								
(Spo	ouse if, filing) First	Name	Middle	Name	Last Name	Э			
Un	ited States Bankrupto	cy Court for the:	EASTERN	DISTRICT OF NO	RTH CARC	DLINA			
Ca	se number								
	nown)							☐ Check	if this is an
								amen	ded filing
∩f	ficial Form 10	6F/F							
	hedule E/F: 0		ho Hav	e Unsecured	d Claim	s			12/15
Be a	s complete and accur	ate as possible. Us	e Part 1 for c	reditors with PRIOR	ITY claims a	nd Part 2 fo			ist the other party to
	executory contracts o edule G: Executory Co								
Sch	edule D: Creditors Wh Attach the Continuation	o Have Claims Secu	ured by Prop	erty. If more space is	s needed, co	py the Part	t you need, fill it out,	number the entries	in the boxes on the
	e and case number (if		e. II you liav	e no imormation to re	ероппага	irt, do not i	ne that Fart. On the	lop of any additiona	pages, write your
Pa	rt 1: List All of Yo	our PRIORITY Un	secured CI	aims					
1.	Do any creditors have	e priority unsecured	d claims aga	inst you?					
	☐ No. Go to Part 2.								
	Yes.								
2.	List all of your priorit identify what type of cla possible, list the claims	aim it is. If a claim ha	s both priority	and nonpriority amou	ınts, list that o	claim here a	and show both priority	and nonpriority amour	nts. As much as
	Part 1. If more than on						o phonty unbodulou o	amo, im out the cont	maaton rago or
	(For an explanation of	each type of claim, s	ee the instruc	tions for this form in the	he instruction	booklet.)	Total claim	Priority	Nonpriority
	_						Total Claim	amount	amount
2.1				Last 4 digits of acco	unt number	6997	\$432.00	\$432.00	\$0.00
	Priority Creditor's PO Box 2500			When was the debt i	incurred?				
	Raleigh, NC 2	-						_	
	Number Street Ci	•		As of the date you fil	le, the claim	is: Check a	all that apply		
	Who incurred the de	ebt? Check one.		☐ Contingent					
	Debtor 1 only			Unliquidated					
	Debtor 2 only			☐ Disputed					
	Debtor 1 and Deb	•		Type of PRIORITY u		ıim:			
	☐ At least one of the	e debtors and anothe	er	☐ Domestic support	obligations				
	☐ Check if this clai	im is for a commun	nity debt	Taxes and certain	other debts y	ou owe the	government		
	Is the claim subject	to offset?		☐ Claims for death o	or personal inj	ury while yo	ou were intoxicated		
	■ No □ Yes			Other. Specify	0441	.			_
					014 Incon	ne rax			
2.2	NC Dept of R	evenue		Last 4 digits of acco	unt number	6997	\$35.00	\$35.00	\$0.00
	Priority Creditor's	Name		- 	10				_ <u> </u>
	PO Box 2500 Raleigh, NC 2			When was the debt i	incurrea?			_	
	Number Street Ci			As of the date you fi	le, the claim	is: Check a	all that apply		
	Who incurred the de	ebt? Check one.		☐ Contingent					
	Debtor 1 only			Unliquidated					
	Debtor 2 only			☐ Disputed					
	☐ Debtor 1 and Deb	otor 2 only		Type of PRIORITY u	nsecured cla	ıim:			
	☐ At least one of the	e debtors and anothe	er	☐ Domestic support	obligations				
	☐ Check if this clai	im is for a commun	nity debt	Taxes and certain	other debts v	ou owe the	government		
	Is the claim subject	to offset?		☐ Claims for death o	-		-		
	■ No			☐ Other. Specify	,	,			
	☐ Yes				015 Incon	ne Tax			

Official Form 106 E/F

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Debto	or 1	James Timothy Bullard	Case number (if know)					
Part 2	2:	List All of Your NONPRIORITY Unsecur	ed Claims					
3. D	o an	y creditors have nonpriority unsecured claims	against you?					
] No	. You have nothing to report in this part. Submit th	nis form to the court with your other schedules.					
	Yes	S.						
ur th	nsecu	ured claim, list the creditor separately for each cla ne creditor holds a particular claim, list the other of	alphabetical order of the creditor who holds each claim. If a creditor has more that im. For each claim listed, identify what type of claim it is. Do not list claims already incorreditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more				
				Total claim				
4.1	С	Charlotte Radiology	Last 4 digits of account number 0005	\$49.00				
	N	onpriority Creditor's Name	. <u></u> ,					
		O Box 600109	When was the debt incurred?	_				
		Raleigh, NC 27675 umber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
		/ho incurred the debt? Check one.						
		Debtor 1 only	☐ Contingent					
		Debtor 2 only	Unliquidated					
		Debtor 1 and Debtor 2 only	☐ Disputed					
		At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
		Check if this claim is for a community	☐ Student loans					
		ebt the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
		No	\square Debts to pension or profit-sharing plans, and other similar debts					
		Yes	■ Other. Specify Medical Bill	_				
4.2	D	DirecTV	Last 4 digits of account number	\$1,461.40				
		onpriority Creditor's Name	When was the debt incurred?					
		Phoenix, AZ 85062-8626	As file by a file it also be a file in a late of the file in a lat					
		umber Street City State Zlp Code /ho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	_	Debtor 1 only	☐ Contingent					
		Debtor 2 only	■ Unliquidated					
	_	Debtor 1 and Debtor 2 only	☐ Disputed					
		At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	_	Check if this claim is for a community	☐ Student loans					
		ebt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is	the claim subject to offset?	report as priority claims					
		No	Debts to pension or profit-sharing plans, and other similar debts					
		Yes	Other. Specify Collection	_				

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Debtor 1 James Timothy Bullard		Case number (if know)				
4.3	Macys	Last 4 digits of account number	\$300.00			
	Nonpriority Creditor's Name PO Box 68915 Des Moines, IA 50368-9195	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	■ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card				
4.4	North Carolina Emergency Physicians	Last 4 digits of account number 9865	\$505.00			
	Nonpriority Creditor's Name Mailstop: 43727981 PO Box 660827 Dallas, TX 75266	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	■ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical Bill				
4.5	Scotland Memorial Hospital Nonpriority Creditor's Name	Last 4 digits of account number 0001	\$994.80			
	PO Box 1847	When was the debt incurred?				
	Laurinburg, NC 28353 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	■ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	■ Other. Specify Medical Bill				

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Debtor	1 James Timothy Bullard	Case number (if know)				
4.6	Southeastern Reg. Med. Ctr.	Last 4 digits of account number 7197	\$392.55			
	Nonpriority Creditor's Name PO Box 580006 Charlotte, NC 28258	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	■ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did report as priority claims	not			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Medical Bill				
4.7	Time Warner Cable	Last 4 digits of account number	\$300.00			
	Nonpriority Creditor's Name PO Box 70873 Charlotte, NC 28272-0873	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did report as priority claims	not			
	No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collection				
4.8	Verizon	Last 4 digits of account number	\$484.00			
	Nonpriority Creditor's Name	Opened 6/22/07 Last Active				
	Po Box 49 Lakeland, FL 33802	When was the debt incurred? 6/30/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	■ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did report as priority claims	not			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collection				

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Debto	r1 James Timothy Bullard		Case number (if know)	
4.9	Verizon Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$330.00
	Po Box 49 Lakeland, FL 33802	When was the debt incurred?	Opened 2/09/07 Last Active 6/30/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection		
4.1	Verizon Wireless	Last 4 digits of account number	0001	\$882.00
	Nonpriority Creditor's Name		Opened 02/09 Last Active	
	Po Box 49	When was the debt incurred?	8/07/10	
	Lakeland, FL 33802 Number Street City State Zlp Code	As of the date you file, the claim i	se. Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Officer all triat apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Collection		
4.1	Verizon Wireless	Last 4 digits of account number	0001	\$186.00
	Nonpriority Creditor's Name		Opened 06/07 Last Active	
	Po Box 49 Lakeland, FL 33802	When was the debt incurred?	9/30/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g pians, and other similar debts	
	Yes	■ Other. Specify Collection		

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Debtor 1	James Ti	mothy Bullard		Case r	number (if kno	ow)	
		ngerhut Fres	Last 4 digits of account number	5169			\$350.00
(Nonpriority Cred 6250 Ridge Saint Cloud		When was the debt incurred?	Oper 10/20		Last Active	
Number Street City State Zlp Code Who incurred the debt? Check one.		•	As of the date you file, the claim	is: Checl	k all that apply	1	
	■ Debtor 1 onl		☐ Contingent				
	Debtor 2 onl	•	Unliquidated				
	_	d Debtor 2 only	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		s claim is for a community	☐ Student loans				
•	debt	bject to offset?	Obligations arising out of a sepreport as priority claims	aration aç	greement or d	ivorce that you did not	
1	■ No		Debts to pension or profit-shari	ng plans,	and other sim	ilar debts	
	☐ Yes		■ Other Specify Credit				
			· · · 				
Part 3:	List Others	s to Be Notified About a De	bt That You Already Listed				
is trying have m	g to collect fro	m you for a debt you owe to se	about your bankruptcy, for a debt that omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add or submit this page.	n Parts 1	or 2, then lis	t the collection agency here	. Similarly, if you
	d Address		On which entry in Part 1 or Part 2 did you		•		
	V by their a	gent	Line 4.2 of (Check one):			Priority Unsecured Claims	
PO Box		0.5	•	■ Part 2: Creditors with Nonpriority Unsecured Claims			S
Souting	jate, MI 481	95	Last 4 digits of account number	8	609		
Part 4:	Add the A	mounts for Each Type of U	nsecured Claim				
	ne amounts of	certain types of unsecured cla	ims. This information is for statistical	reporting	purposes or	nly. 28 U.S.C. §159. Add the	amounts for each
type of	unsecured cla	im.					
	6a.	Domestic support obligation	e	6a.	\$	Total Claim	
To clai	otal	Domestic Support obligation	5	oa.	Φ	0.00	
from Pa		Taxes and certain other debt	s you owe the government	6b.	\$	467.00	
	6c.		injury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority un	secured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a the	rough 6d.	6e.	\$	467.00	

Total claims from Part 2

6f.	Student loans	6f.	\$ Total Claim 0.00
6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 6,234.75
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 6,234.75

Fill in this inforr					
Debtor 1	Debtor 1 James Timothy Bullard				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F NORTH CAROLINA		
Case number (if known)					ck if this is an

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	rerson or	Name, Number	r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

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Fill in thi	s information to identify your	case:			
Debtor 1	James Timothy B				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT O	F NORTH CAROLINA		
Case nur (if known)	nber				☐ Check if this is an amended filing
	al Form 106H <mark>dule H: Your Co</mark> d	lebtors			12/15
people ar ill it out, our nam	e filing together, both are equ	ually responsible for supper boxes on the left. Attach). Answer every question	olying correct information the Additional Page to t	n. If more space is r this page. On the to	rate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
□ No)				
■ Ye	es				
	thin the last 8 years, have yo na, California, Idaho, Louisiana				
■ No	o. Go to line 3.				
□ Ye	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make su	re you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	'IP Code		Column 2: The cro	editor to whom you owe the debt es that apply:
3.1	Tera Deese PO Box 1573 Pembroke, NC 28372-157	3		■ Schedule D, I □ Schedule E/F □ Schedule G _ Selene Finance	, line

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Fill in this infor	nation to identify your case:		
Debtor 1	James Timothy Bullard		
Debtor 2 (Spouse, if filing)			
United States B	Bankruptcy Court for the: _EASTERN DISTRICT	OF NORTH CAROLINA	
Case number (If known)			Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:
Official F	orm 106I		MM / DD/ YYYY
Schedu	e I: Your Income		12/15
supplying corr spouse. If you	e and accurate as possible. If two married peo ect information. If you are married and not filin are separated and your spouse is not filing wi ate sheet to this form. On the top of any additi	ng jointly, and your spouse is living the you, do not include information	g with you, include information about your
Part 1:	Describe Employment		
Fill in you informati	ır employment on.	Debtor 1	Debtor 2 or non-filling spouse

Fill in your employment nformation.		Debtor 1	Debtor 2 or non-filing spouse
f you have more than one job,	Employment status	■ Employed	☐ Employed
attach a separate page with information about additional		□ Not employed	☐ Not employed
employers.	Occupation	Carpenter/Construction	
Include part-time, seasonal, or self-employed work.	Employer's name	American Pride Construction LLC	
Occupation may include student or homemaker, if it applies.	Employer's address	8915 B Patterson Ave Richmond, VA 23229	
	How long employed ti	nere? 7 months	

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse

- List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
- 3. Estimate and list monthly overtime pay.
- Calculate gross Income. Add line 2 + line 3.

		FOI DEDIOI I	non-filir	ng spouse
		0.440.54		N 1/A
2.	\$	3,148.51	\$	N/A
3.	+\$	0.00	+\$	N/A
4.	\$	3,148.51	\$	N/A

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	James Timothy Bullard	-	С	ase n	umber (<i>if know</i>	n)				
						Debtor 1		non-f	Debtor filing s	pouse	
	Сор	y line 4 here	4.		\$	3,148.5	1	\$		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	0.0	0	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.0		\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$	0.0	_	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$	0.0	0	\$		N/A	<u> </u>
	5e.	Insurance	5e		\$	0.0	0	\$		N/A	\
	5f.	Domestic support obligations	5f.		\$	0.0		\$		N/A	_
	5g.	Union dues	5g		\$	0.0	_	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h	.+	\$	0.0	0	+ \$		N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	(0.0	0	\$		N/A	<u>\</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	(<u> </u>	3,148.5	1	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0.0	0	\$		N/A	
	8b.	Interest and dividends	8b		\$	0.0		\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.0	0	\$		N/A	L
	8d.	Unemployment compensation	8d		\$	0.0	0	\$		N/A	_
	8e.	Social Security	8e		\$	0.0	0	\$		N/A	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$	0.0 0.0	_	\$		N/A N/A	_
	8g. 8h.	Other monthly income. Specify:	oy 8h		» Տ			+ \$		N/A	_
	OH.		_ 011		Ψ	0.0	_	`		11/7	<u>`</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.0	0	\$		N/	Α
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	3	,148.51 +	\$		N/A	= \$	3,148.51
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		~ —		,140.01	Ť -		14/7	-	0,140.01
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe					•	chedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	3,148.51
13.	Do y	you expect an increase or decrease within the year after you file this form	?						'	Combi	ined ly income
		No.									
		Voc Evoloin:									

EIII	in this informa	tion to identify yo	our case:			1		
	otor 1	James Timot		rd		Che	eck if this is:	
Deb	otor 2						An amended filing A supplement sho	wing postpetition chapter
(Sp	ouse, if filing)					_		f the following date:
Unit	ted States Bankr	uptcy Court for the:	EASTE	RN DISTRICT OF NORTH	H CAROLINA		MM / DD / YYYY	
	se number nown)							
	fficial Fo		Evnor					4044
Be info nur	as complete a ormation. If m mber (if know	ore space is ne n). Answer ever	possible eded, atta y questio	. If two married people and the control of the cont				
Par 1.	t 1: Descr Is this a joir	ibe Your House it case?	hold					
	■ No. Go to		n a separ	ate household?				
	□N	0	•	al Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state dependents				Girlfriend		37 yr	□ No ■ Yes
								□ No □ Yes
								□ No
								Yes
_	_						_	☐ Yes
3.	expenses of	enses include f people other tl d your depende	han _	No Yes				
Est	imate your ex	ate Your Ongoii penses as of your date after the b	our bankr	uptcy filing date unless y	ou are using this followed the second	orm as a s J, check	supplement in a Ch the box at the top o	apter 13 case to report of the form and fill in the
the		n assistance and		government assistance i cluded it on <i>Schedule I:</i> `			Your exp	penses
4.		or home owners		ses for your residence. I or lot.	nclude first mortgage	e 4.	\$	0.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	•	rty, homeowner's				4b.	\$	0.00
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. 4d.	·	0.00 0.00
5.				our residence, such as ho	me equity loans	5.		0.00

Debtor 1	James Ti	mothy Bullard	Case nur	mb	er (if known)	
c 114:1	ities:					
6. Util 6a.		heat, natural gas	6a		¢	150.00
6b.	•	ver, garbage collection	6b		·	80.00
		, cell phone, Internet, satellite, and cable services			\$ 	
6c.	•	•	6c		·	280.00
6d.	Other. Spe		6d		\$	0.00
		keeping supplies			\$	300.00
		hildren's education costs	8		\$	0.00
	-	y, and dry cleaning	9		\$	100.00
0. Per	sonal care p	roducts and services	10).	\$	0.00
1. Me d	dical and der	ital expenses	11		\$	0.00
	nsportation. not include ca	Include gas, maintenance, bus or train fare.	12).	\$	495.00
		clubs, recreation, newspapers, magazines, and				0.00
			14		·	
		ibutions and religious donations	14	٠.	Ψ	0.00
-	urance.	curance deducted from your new or included in line	s 4 or 20			
	not include in . Life insura	surance deducted from your pay or included in line	s 4 or 20. 15a		¢	0.00
						0.00
	. Health insu		15b			0.00
	. Vehicle ins		15c		·	0.00
		rance. Specify:	15d	1.	\$	0.00
_		clude taxes deducted from your pay or included in			•	
	ecify:		16).	\$	0.00
		ase payments:	47-		c	0.00
		ents for Vehicle 1	17a		:	0.00
		ents for Vehicle 2	17b		\$	0.00
	. Other. Spe		17c		*	0.00
	. Other. Spe		17d	1.	\$	0.00
		of alimony, maintenance, and support that you		3.	\$	0.00
		our pay on line 5, Schedule I, Your Income (Off you make to support others who do not live w	101ai i 01111 1001 <i>j</i> .		\$	
		you make to support others who do not live w	11 you.		Ψ	0.00
	ecify:	erty expenses not included in lines 4 or 5 of this			ur Incomo	
		on other property	20a storm or on <i>Schedule I: 1</i>			0.00
	. Real estate		20b			0.00
		omeowner's, or renter's insurance	20c		·	0.00
		ce, repair, and upkeep expenses	20d			0.00
20e	. Homeown	er's association or condominium dues	20e		·	0.00
1. O th	er: Specify:	Payment to Secured and Priority Claims	21		+\$	629.00
2 Cal	culate vous s	nonthly expenses				
	. Add lines 4	•			\$	2 024 00
		· ·	oial Form 106 L 2			2,034.00
		2 (monthly expenses for Debtor 2), if any, from Office	лан гогт 106J-2		\$	
22c	. Add line 22a	and 22b. The result is your monthly expenses.			\$	2,034.00
3. Cal	culate vour r	nonthly net income.		L		
		12 (your combined monthly income) from Schedule	I. 23a	ı. :	\$	3,148.51
		monthly expenses from line 22c above.	23b		·	2,034.00
200	. Copy your		200		<u> </u>	۷,004.00
23c	. Subtract ve	our monthly expenses from your monthly income.			_	, <u>.</u> .
		is your monthly net income.	23c	;. [\$	1,114.51
)4 D =		m in annual and decrease in view armanas a cultura	the year often file (L.)	:-	form?	
		In increase or decrease in your expenses withing usexpect to finish paying for your car loan within the year of				or decrease bossum of a
		u expect to finish paying for your car loan within the year overms of your mortgage?	n do you expect your mortgage	₽ þ8	ayınıeni io increase	or decrease pecause of a
		omo or your mortgago:				
1 💻						
	Yes.	Explain here:				

Fill in this infor	mation to identify your	case:			
Debtor 1	James Timothy E		Lost Nome		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	F NORTH CAROLINA		
Case number					
(if known)					☐ Check if this is an amended filing
Official Fam	400D				
Official Ford Declarat		an Individual	Debtor's Sch	nedules	12/15
		r, both are equally respon			
obtaining mone		n connection with a bank			nent, concealing property, or , or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	eone who is NOT an attorn	ney to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumr	mary and schedules filed	with this declaration	and
X /s/ .lan	nes Timothy Bullard		X		
	Timothy Bullard		Signature of De	ebtor 2	
Signatu	ire of Debtor 1				
Date	August 5, 2016		Date		

Fill	in this inforn	nation to identify you	r case:			
	tor 1	James Timothy				
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	NORTH CAROLINA		
Cas	e number					
(if kno	_				_	heck if this is an mended filing
	ficial Fo		A.C			
Sta	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/10
	ber (if know	n). Answer every que	•		/ additional pages, write you	ir name and case
1.	What is you	r current marital statu	ıs?			
	☐ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ Na		•	•		
	■ No □ Yes. Lis	at all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
	■ No					
	_	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pari	2 Explai	n the Sources of You	r Income			
4.			nployment or from operatin u received from all jobs and a		ear or the two previous caler	ndar years?
			have income that you receive			
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$19,371.05	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 James Timothy Bullard			Case number (if known)					
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
	r last caler anuary 1 to		r 31, 2015)	■ Wages, commissions, bonuses, tips	\$15,387.00	☐ Wages, common bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	usiness	
			efore that: r 31, 2014)	■ Wages, commissions, bonuses, tips	\$34,639.00	☐ Wages, common bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	usiness	
	and other winnings. List each	public ben If you are	efit payments; filing a joint cas	ner that income is taxable. Exa pensions; rental income; inter se and you have income that your separa	rest; dividends; money collect you received together, list it c	ted from lawsuits; ronly once under Del	oyalties; and otor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	me	Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain F	ayments You	Made Before You Filed for	Bankruptcy			
6.	□ No.	Neither I individual During th No. Yes * Subject	Debtor 1 nor I I primarily for a e 90 days befo Go to line 7 List below of paid that cr not include at to adjustmen or Debtor 2 c e 90 days befo Go to line 7 List below of	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the ton 4/01/19 and every 3 year or both have primarily consumer ore you filed for bankruptcy, dispense	Imer debts. Consumer debtald purpose." d you pay any creditor a total d a total of \$6,425* or more into for domestic support oblighis bankruptcy case. Is after that for cases filed on timer debts. d you pay any creditor a total d a total of \$600 or more and	I of \$6,425* or more none or more payr lations, such as chil or after the date of I of \$600 or more?	e? nents and the disconnection and justment output that adjustment output that output that adjusted in the disconnection and the di	ne total amount you nd alimony. Also, do
			attorney for	ments for domestic support o this bankruptcy case.		,	,	. ,
	Creditor	's Name a	nd Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for

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Case number (if known)

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	u are a general ny managing ag	partner; corporations ent, including one for	
	No						
	Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment	
3.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	iny property on a	ccount of a dek	ot that benefited an	
	■ No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the		
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures	para		morado ordan	or o riamo	
).	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No						
	Yes. Fill in the details.						
	Case title Case number	Nature of the case			Status of the	Status of the case	
	Selene Finance Lp Vs. James Timothy Bullard 16 SP 0047	Foreclosure Robeson County Courthouse 500 North Elm St Lumberton, NC 28358		St	■ Pending □ On appeal □ Concluded		
					Hearing set Sale Pendir	for 8-11-16, ng 9-1-16	
0.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garnis	hed, attached,	seized, or levied? Value of the property	
1	Within 90 days before you filed for bankru			nancial institution	set off any an	nounts from your	
	accounts or refuse to make a payment bed No □ Yes. Fill in the details.		aung a same or m		, co. c., u., u.,	iounio ii oiii you	
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount	
2.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	e for the benefi	it of creditors, a	

Debtor 1 James Timothy Bullard

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Del	btor 1 James Timothy Bullard		Case number	(if known)	
Par	rt 5: List Certain Gifts and Contributions	s			
13.	Within 2 years before you filed for bankru No	uptcy, d	lid you give any gifts with a total value of more t	han \$600 per person	,
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	n	Describe the gifts	Dates you gave	Value
	per person	U	Describe the gins	the gifts	value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru No	ıptcy, d	lid you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or co	ontributi	on.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Par	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling? ■ No □ Yes. Fill in the details.	otcy or	since you filed for bankruptcy, did you lose anyt	hing because of thef	t, fire, other disaster,
		Include	be any insurance coverage for the loss the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Do			is diaming of mine of of Goriedate 172. Troporty.		
16.	consulted about seeking bankruptcy or p	otcy, di	d you or anyone else acting on your behalf pay on ga bankruptcy petition? s, or credit counseling agencies for services required	, , ,	rty to anyone you
	Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not Yo	ou	transferred	or transfer was	payment
	Bruce Allen, Attorney at Law 1000 Wildwood Drive Fayetteville, NC 28304-3036 wlfman@prodigy.net		Attorney Fees	7-22-16	\$273.00
17.	promised to help you deal with your cred Do not include any payment or transfer that	litors o		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
				Hauc	

Debtor 1	James	Timothy	Bullard
----------	-------	----------------	----------------

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.									
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		payme	ibe any property or ents received or debts n exchange	Date transfer was made				
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot No Yes. Fill in the details.		y property to a	self-settle	d trust or similar device o	of which you are a				
	Name of trust	Description and v	alue of the prop	perty trans	ferred	Date Transfer was made				
Pai	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and Sto	orage Unit	s					
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ ■ No □ Yes. Fill in the details.	other financial accour	nts; certificates	of deposit						
		Last 4 digits of Type of accour instrument		unt or Date account was closed, sold, moved, or transferred		Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)			the contents	Do you still have it?				
22.	Have you stored property in a storage unit or	r place other than your	home within 1	year befor	e you filed for bankruptc	y?				
	■ No □ Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?				
Pai	t 9: Identify Property You Hold or Control f	or Someone Else								
23.	Do you hold or control any property that som for someone.	neone else owns? Inclu	ude any propert	y you borr	owed from, are storing f	or, or hold in trust				
	■ No □ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value				
Pai	t 10: Give Details About Environmental Info	rmation								
For	the nurnose of Part 10, the following definition	ns anniv								

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 James Timothy Bullard

Case number (if known)

_	reg	ulations controlling the cleanup of thes	e sub	stances, wastes, or material.				
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Rep	ort a	II notices, releases, and proceedings th	at yo	u know about, regardless of wher	the	ey occurred.		
24.	Has	any governmental unit notified you that	ıt you	may be liable or potentially liable	une	der or in violation of an environm	ental law?	
		No Yes. Fill in the details.						
	ш	res. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
25.	Hav	e you notified any governmental unit of	f any	release of hazardous material?				
		No						
		Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and	d	Environmental law, if you know it	Date of notice	
26.	Hav	e you been a party in any judicial or ad	minis	ZIP Code) trative proceeding under any envi	ron	mental law? Include settlements	and orders.	
		.,		3 , .				
		No						
		Yes. Fill in the details.						
	Case Title Case Number			Court or agency Name	Na	ature of the case	Status of the case	
				Address (Number, Street, City, State and ZIP Code)				
Par	t 11:	Give Details About Your Business or	Conr	nections to Any Business				
27.	Wit	nin 4 years before you filed for bankrup	tcy, d	id you own a business or have an	y of	f the following connections to any	y business?	
		lacksquare A sole proprietor or self-employed	in a tı	ade, profession, or other activity,	eith	her full-time or part-time		
		☐ A member of a limited liability com	pany	(LLC) or limited liability partnership	ip (l	LLP)		
		☐ A partner in a partnership						
		☐ An officer, director, or managing ex	cecuti	ve of a corporation				
		☐ An owner of at least 5% of the votir	ng or	equity securities of a corporation				
		No. None of the above applies. Go to	Part 1	2.				
		Yes. Check all that apply above and fil	l in th	e details below for each business	S.			
		siness Name dress	Des	scribe the nature of the business		Employer Identification numbe Do not include Social Security		
		mber, Street, City, State and ZIP Code)	Nar	ne of accountant or bookkeeper		Dates business existed		
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, d	id you give a financial statement t	to a	nyone about your business? Incl	ude all financial	
		No						
		Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)							
		_						

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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Debtor	1 James Timothy Bullard	Case number (if known)
with a l		statement, concealing property, or obtaining money or property by fraud in connection 00, or imprisonment for up to 20 years, or both.
/s/ Jai	mes Timothy Bullard	
	s Timothy Bullard	Signature of Debtor 2
Signat	ure of Debtor 1	
Date	August 5, 2016	Date
Did you	attach additional pages to Your Statement of F	Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did you	ı pay or agree to pay someone who is not an att	orney to help you fill out bankruptcy forms?
■ No		
☐ Yes.	Name of Person Attach the Bankruptcy Pe	etition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	Fill in this information to identify your case:						
Debtor 1	James Timothy Bulla	ard					
Debtor 2 (Spouse, if filing)							
United States B	United States Bankruptcy Court for the: Eastern District of North Carolina						
Case number (if known)							

Check	Check as directed in lines 17 and 21:								
1	According to the calculations required by this Statement:								
•	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	2. Disposable income is determined under 1 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

		,					
Part	1: Calculate Your Average Monthly Income						
1.	What is your marital and filing status? Check one of	only.					
	■ Not married. Fill out Column A, lines 2-11.						
	$\hfill\square$ Married. Fill out both Columns A and B, lines 2-11						
10 th	II in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6-e 6 months, add the income for all 6 months and divide the totoouses own the same rental property, put the income from that	month peri al by 6. Fill	od would in the re	l be March 1 throusult. Do not includ	igh August 31. If the am de any income amount n	ount of your monthly income varied nore than once. For example, if both	during
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and cor	nmissio	ons (before all	\$ 3,148.51	\$	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e paymer	nts from	a spouse if	\$	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3.	t. Include ld, your d	regulai epende	r contributions nts, parents,	\$ 0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor '	1				
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	-\$	0.00				
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	\$	
6.	Net income from rental and other real property	Debtor					
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	- \$	0.00				
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$ 0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 o	or	
7. Int	erest, dividends, and royalties				\$	0.00	\$		
	employment compensation				\$	0.00	\$		
	not enter the amount if you contend to Social Security Act. Instead, list it he		was a benefit	under					
1	For you	\$	0.0	0					
	For your spouse								
	nsion or retirement income. Do not nefit under the Social Security Act.	include any amount recei	ived that was	а	\$	0.00	\$		
Do red do	come from all other sources not list not include any benefits received und ceived as a victim of a war crime, a cri mestic terrorism. If necessary, list other al below.	der the Social Security Actime against humanity, or i	t or payment international	s or					
					\$	0.00	\$		
					\$	0.00	\$		
	Total amounts from separate pa	ages, if any.		+	\$	0.00	\$		
	Iculate your total average monthly ch column. Then add the total for Column			\$	3,148.51	+ \$_		= \$	3,148.51
12. Co	py your total average monthly incolculate the marital adjustment. Che	ome from line 11.						\$	3,148.51
10. 54	You are not married. Fill in 0 below								
	You are married and your spouse is		elow.						
	You are married and your spouse is	,							
	Fill in the amount of the income list dependents, such as payment of the	ed in line 11, Column B, t							
	Below, specify the basis for excludi adjustments on a separate page.	ing this income and the ar	mount of inco	me de	voted to eac	ch purpose	e. If necessary	/, list additi	onal
	If this adjustment does not apply, e	nter 0 below.							
				\$ \$					
				Ψ— +\$					
	Total			\$	0.0	00 C	opy here=>		0.00
14. Y	our current monthly income. Subtr	ract line 13 from line 12.						\$	3,148.51
15. C	alculate your current monthly inco	me for the year. Follow	these steps:						
1/	5a. Copy line 14 here=>							\$	3,148.51
	Multiply line 15a by 12 (the number							x 1	2

Debtor 1 James Timothy Bullard

Debt	or 1	Jame	es Timothy Bullard		Case number (if known)		
16	. Cal	culate	the median family income that applies to y	ou. Follow these	steps:		
	16a	. Fill in	the state in which you live.	NC	_		
	16b	. Fill in	the number of people in your household.	1			
			the median family income for your state and	size of household		\$	41,590.00
47	· Uas	instru	d a list of applicable median income amounts ctions for this form. This list may also be availe lines compare?			Ψ	<u> </u>
17	. 17a	_	Line 15b is less than or equal to line 16c. C	In the ten of page	1 of this form, shock how 1. Disposable inc	omo is not o	datarminad undar
	170	. –	11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
	17b	. 🗆	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	lation of Your D			
Par	t 3:	Cal	culate Your Commitment Period Under 11	U.S.C. § 1325(b)	(4)		
18.	Col	y your	total average monthly income from line 1	1.		\$	3,148.51
19.	con	tend tha	e marital adjustment if it applies. If you are at calculating the commitment period under 1 acome, copy the amount from line 13.				
	•		marital adjustment does not apply, fill in 0 on	line 19a.		- \$	0.00
	19b	. Subtr	act line 19a from line 18.			\$	3,148.51
		_					
20.			your current monthly income for the year.			•	3,148.51
	20a		line 19b			\$	
		Multip	oly by 12 (the number of months in a year).			X	12
	20b	. The re	esult is your current monthly income for the yo	ear for this part of	the form	\$	37,782.12
	200	. Сору	the median family income for your state and	size of household	from line 16c	\$	41,590.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwis	se ordered by the	court, on the top of page 1 of this form, che	eck box 3, T	he commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less otherwise or	dered by the court, on the top of page 1 of t	his form, ch	eck box 4, The
Par	t 4:	Sig	n Below				
	By:	signing	here, under penalty of perjury I declare that t	he information on	this statement and in any attachments is tr	ue and corre	ect.
)	(/s	/ Jame	es Timothy Bullard				
			Fimothy Bullard of Debtor 1				
		e Aug	just 5, 2016				
		MM	/ DD / YYYY				
			ked 17a, do NOT fill out or file Form 122C-2.	hic form On line	20 of that form convivaling autrent monthly:	ncomo from	lino 14 abovo
	II y	ou chec	ked 17b, fill out Form 122C-2 and file it with t	nis ionn. On line i	oe or macronni, copy your current monthly l	income from	iiie 14 above.

Debtor 1 James Timothy Bullard Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 02/01/2016 to 07/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: American Pride Construction LLC

Income by Month:

6 Months Ago:	02/2016	\$4,026.00
5 Months Ago:	03/2016	\$2,380.00
4 Months Ago:	04/2016	\$1,740.00
3 Months Ago:	05/2016	\$2,705.70
2 Months Ago:	06/2016	\$4,587.25
Last Month:	07/2016	\$3,452.10
	Average per month:	\$3,148.51

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-04117-5-JNC Doc 1 Filed 08/05/16 Entered 08/05/16 16:43:35 Page 51 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of North Carolina

In re	James Timothy Bullard		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSAT	TON OF ATTORN	EY FOR DE	CBTOR(S)
co	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce ompensation paid to me within one year before the filing of the e rendered on behalf of the debtor(s) in contemplation of or in a	petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	5,000.00
	Prior to the filing of this statement I have received		\$	273.00
	Balance Due		\$	4,727.00
2. \$_	310.00 of the filing fee has been paid.			
3. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	I have not agreed to share the above-disclosed compensation	n with any other person unle	ess they are memb	pers and associates of my law firm.
	I have agreed to share the above-disclosed compensation wi copy of the agreement, together with a list of the names of the			
6. Iı	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:			
b. c.	Analysis of the debtor's financial situation, and rendering adv. Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and of [Other provisions as needed]	f affairs and plan which ma	y be required;	
7. B	y agreement with the debtor(s), the above-disclosed fee does n Representation of the debtors in any discharge any other adversary proceeding. Preparation a of liens on household goods.	eability actions, judicial	l lien avoidance	
	CER	TIFICATION		
	certify that the foregoing is a complete statement of any agreer nkruptcy proceeding.	nent or arrangement for pay	ment to me for re	epresentation of the debtor(s) in
Au	igust 5, 2016	/s/ Bruce Allen		
Date		Bruce Allen Signature of Attorney		
		Bruce Allen, Attorne		
		1000 Wildwood Drive Fayetteville, NC 2830		
		(910)867-7770 Fax:	(910)867-7770	
		wlfman@prodigy.ne	t	
		Name of law firm		

United States Bankruptcy Court Eastern District of North Carolina

		Eastern District of North Caronna		
ı re	James Timothy Bullard		Case No.	
	<u> </u>	Debtor(s)	Chapter	13
	VER	RIFICATION OF CREDITOR M	ATRIX	
ab	ove-named Debtor hereby verifies	s that the attached list of creditors is true and corn	rect to the best	of his/her knowledge.
ate:	August 5, 2016	/s/ James Timothy Bullard		
		James Timothy Bullard		

Signature of Debtor

James Timothy Bullard 511 N. Jones Street Pembroke, NC 28372 Robeson County Courthouse 500 North Elm St Lumberton, NC 28358

Bruce Allen Bruce Allen, Attorney at Law 1000 Wildwood Drive Fayetteville, NC 28304-3036 Scotland Memorial Hospital PO Box 1847 Laurinburg, NC 28353

Charlotte Radiology PO Box 600109 Raleigh, NC 27675 Selene Finance Lp 9990 Richmond Houston, TX 77042

DirecTV PO Box 78626 Phoenix, AZ 85062-8626 Southeastern Reg. Med. Ctr. PO Box 580006 Charlotte, NC 28258

DirecTV by their agent Allied Interstate PO Box 1962 Southgate, MI 48195 Tera Deese PO Box 1573 Pembroke, NC 28372-1573

Hutchens Law Firm PO Bo 1028 Fayetteville, NC 28302 Time Warner Cable PO Box 70873 Charlotte, NC 28272-0873

Macys PO Box 68915 Des Moines, IA 50368-9195 Verizon Po Box 49 Lakeland, FL 33802

NC Dept of Revenue PO Box 25000 Raleigh, NC 27640 Verizon Wireless Po Box 49 Lakeland, FL 33802

North Carolina Emergency Physicians Mailstop: 43727981 PO Box 660827 Dallas, TX 75266 Webbank/fingerhut Fres 6250 Ridgewood Roa Saint Cloud, MN 56303